Date:	

PUBLIC AGENDA REQUEST FORM

Date to speak:		
Name:		
Address:		
Phone Number:		
E-mail address:		
	Brief description of topic to be discussed:	
	Signature:	
	signature	
Please return to:	City Clerk City of Eastborough 1 Douglas Eastborough, KS 67207	
Ph: (316) 682-4111 Fax: (316) 682-4193	Edsiboroogri, R3 07 207	
City of Eastborough, Public A	Agenda Form	